

12/07/2006

13:36

LSI LOGIC CORP → 915712732885

NO.290 0003

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: MailMail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
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(CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address))

24319

7590

09/21/2006

LSI LOGIC CORPORATION
1621 BARBER LANE
MS: D-106
MILPITAS, CA 95035

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Mark Salvatore

(Depositor's name)

(Signature)

December 7, 2006

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/727,476

12/04/2003

Lowell L. Winger

03-1980

6234

TITLE OF INVENTION: METHOD AND APPARATUS FOR VIDEO AND IMAGE DEINTERLACING AND FORMAT CONVERSION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional

NO

\$1400

\$300

\$0

\$1700

12/21/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
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HSIA, SHERRIE Y

2622

348-448000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Christopher P. Maiorana,
P.C.

2

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

LSI Logic Corporation

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Milpitas, California, USA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☐ Advance Order - # of Copies

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

☐ A check is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 12-2252 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date

12/6/2006

Typed or printed name

Henry Groth

Registration No. 39,696

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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FAX

13:36

LSI LOGIC CORP → 915712732885

NO. 290 0001

LSI Logic Corporation
1621 Barber Lane
MS: AD-106, Legal
Milpitas, CA 95035

Date December 7, 2006

Number of pages including cover sheet: 3

To: USPTO/Office of Publications

Phone (571) 272-4200

Fax Phone (571) 273-2885

CC: _____

From: Mark Salvatore

Intellectual Property
Paralegal

Phone (408) 433-7472

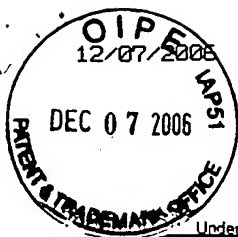
Fax Phone (408) 433-7460

REMARKS:

☐ Urgent ☐ For your review ☒ Reply ASAP ☐ Please comment

Attention: Issue Fee Department

Re: 10/727,476



12/07/2006

13:36

LSI LOGIC CORP → 915712732885

NO.290 0002

PTO/SB/21 (09-04)

Approved for use through 07/31/2008. OMB 0651-0031

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TRANSMITTAL FORM (to be used for all correspondence after Initial filing)	Application Number	10/727,476	
	Filing Date	December 04, 2009	
	First Named Inventor	Winger, Lowell L.	
	Art Unit	2622	
	Examiner Name	Hsia, Shermie Y.	
Total Number of Pages in This Submission	2	Attorney Docket Number	03-1908

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks - Issue Fee Payment		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	LSI Logic Corporation	
Signature		
Printed name	Henry Groth	
Date	12/6/2006	Reg. No. 39,696

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Signature		
Typed or printed name	Mark Salvatore	Date 12-7-06

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